

FAX TRANSMITTAL

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DATE: 11/14/06

OF PAGES (Including This Page) 4**FROM: Mary Wilkes****TRANSMITTING: Letter from Karen Klocke Dated 4/11/05**TO : Deb HunemullerFAX #: 360-407-6305PHONE #: 360-407-0290**MESSAGE**

Deb, You were right. Ecology did not comment on this one. -Mary



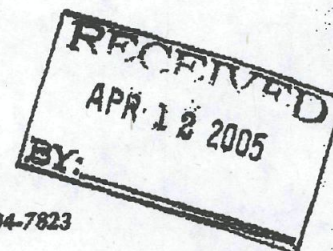
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STATE OF WASHINGTON
DEPARTMENT OF HEALTH
SOUTHWEST DRINKING WATER OPERATIONS

2411 Pacific Avenue • PO Box 47823 • Olympia, Washington 98504-7823
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April 11, 2005

Stephen Harrington
Scenic Shores Water Company
Post Office Box 1
East Olympia, Washington 98540

Dear Mr. Harrington:

Subject: Scenic Shores Water Company, ID# 76530, Thurston County, Water System Plan,
ODW Project #05-0116

Thank you for submitting the Water System Plan (WSP) for the Scenic Shores Water Company Water Supply. Overall, the WSP was clear, thorough, and very well prepared. ODW is encouraged by your accomplishments in producing this WSP. Prior to approval, the following comments must be addressed. Response to these comments should be received by the Office of Drinking Water (ODW) prior to July 8, 2005.

SPECIFIC COMMENTS (requires responses)

1. Section I: Introduction and Executive Summary. Please incorporate the revised physical capacity calculations.
2. Section III, page 1, Planning and Forecasts. The WSP indicates the potential for 36 additional lots to be added within the existing service area. The WSP also describes a service area expansion which would add 40 additional connections. The WSP defines maximum build out to be 286 connections. With the numbers provided in the WSP, it appears that maximum build would be 294 connections (218+36+40). Please confirm the total connections in your revised WSP.
3. Section IV: System Evaluation. Booster pumping capacity is reported to be 200 gpm. Please verify booster pumping capacity and, if necessary, revise the WSP to reflect true booster pumping capacity.
4. Section V: Water Quality Management. The Coliform Monitoring Plan (CMP) must include a section on follow-up procedures once a coliform presence has been confirmed, including public

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notification (PN) and disinfection procedures. A copy of the new PN is enclosed for your reference. Please incorporate the new PN requirements, including sample notifications, in your CMP. Please detail the procedures that will be followed in the event of a positive sample and/or violation. If you need assistance, please contact Sandy Brentlinger at (360) 753-5090 for assistance in revising your CMP to reflect the new PN requirements.

5. Section VI, page 4, Reliability Management. Please revise the Mitigation Response section to include a discussion of booster pumping system failure.
6. Section VII: Adequacy Management. A revised rate structure (see Page IX-4) would promote water conservation.
7. Section VIII, page 1, System Improvement Program. Please revise Auxiliary Power discussion to include auxiliary power for the booster pumping system.
8. Section IX, page 3, Financial Program. Please revise Table IX-3 to include booster pumping system auxiliary power.
9. Section IX, page 3, Financial Program. It appears that the well control improvements and well pump tests have been scheduled for 2007. It seems that the pump test information would be applicable to the physical capacity analysis and therefore be of immediate value. It appears that the physical capacity analysis assumes that Well 1 is pumping directly to storage. Please schedule the well control improvements and the well pump tests prior to 2007, or explain why have been scheduled for 2007.
10. Appendix C: Municipal Water Law. Please provide a signed copy of Attachment 5, Consistency Statement Checklist with your revised WSP.
11. Appendix D: Capacity Evaluation.
 - a. Please clearly indicate which capacity evaluation pertains to the proposed system expansion.
 - b. Please revise the capacity analyses to reflect actual booster pumping capacities and additional of booster pumping auxiliary power.
 - c. Please recalculate the total storage requirements and cite the applicable Design Standard equation which pertains to the calculation.
 - d. Please summarize the capacity calculations and state the total number of ERU's that will be able to be served. Indicate the factor which limits the total number of ERU's that will be able to be served.

OTHER COMMENTS AND RECOMMENDATIONS (do not require responses)

12. The Water Facilities Inventory (WFI) Form should be updated to reflect current conditions: active connections, source depths/capacities, etc.
13. All sanitary survey defects noted in the December, 2004 ODW sanitary survey must be addressed prior to system expansion.
14. Please have your professional engineer stamp and sign the next submittal.

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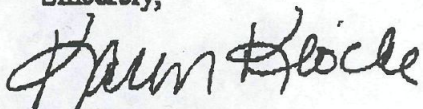
WATER RIGHTS

Ecology did not submit comments regarding the Scenic Shores Water Company WSP. Please remember that ODW's approval of your WSP will not provide any guarantee, and should not be considered to provide any guarantee, concerning legal use of water or subsequent water rights decisions by the Ecology. Depending on Ecology's future actions on your water rights, additional planning or other submittals may be required by the ODW.

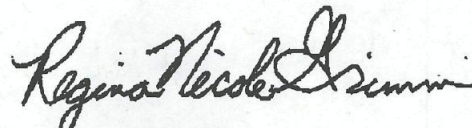
Thank you for submitting your WSP and Plan Report for review. Regulations establishing a schedule of fees for review of planning, engineering, and construction documents were adopted July 1, 2004 (WAC 246-290-990). An itemized invoice for \$1,365 is enclosed.

If you have any questions, please contact Regional Planner Karen Klocke at (360) 664-2999 or Regional Engineer Regina Grimm at (360) 664-2543.

Sincerely,



KAREN KLOCKE
Office of Drinking Water Regional Planner



REGINA GRIMM, P.E.
Office of Drinking Water Regional Engineer

Enclosures

cc: John Segerson, P.E., SEMCON, Inc.
Gary Duvall, Thurston County Health Department
Thurston County Planning Department
Jeff Marti, Ecology-SWRO
Jerrod Davis, ODW

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